



Filing ID #10020474

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Raz Mason
Status: Congressional Candidate
State/District: OR02

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2018
Filing Date: 04/19/2018

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
IAP of Oregon Public Service Retirement Plan [PE]		\$1,001 - \$15,000	Tax-Deferred		
New Alternatives Fund Roth IRA [MF]		\$1,001 - \$15,000	Tax-Deferred		
TD Ameritrade IRA [IH]		\$1,001 - \$15,000	Tax-Deferred		

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
North Wasco County School District 21	salary	\$.00	\$26,160.75
Hood River County School District	salary	\$6,415.67	\$10,537.56
Mason Consulting, LLC	salary	\$2,142.40	\$3,254.00
S4 Teachers Northwest LLC	salary	N/A	\$267.53
Providence Health & Services	salary	\$2,486.76	N/A

Source	Type	Amount Current Year to Filing	Amount Preceding Year
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SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	fedloan Servicing	Consolidation Date: 01/11/2012	Direct Sub Consolidation Loan #1	\$15,001 - \$50,000
	fedloan Servicing	Consolidation Date: 01/11/2012	Direct Sub Consolidation Loan #2	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
February 2015	Myself and the State of Oregon	Continued participation in pension plan.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☐ Yes ☒ No

COMMENTS

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Raz Mason , 04/19/2018